

Commonwealth of Kentucky
Personnel Cabinet

Health Insurance Program Monthly Report



Prepared for:

Kentucky Group Health Insurance
Board Members

March 2015

DASHBOARD REPORT: BASED ON INCURRED CLAIMS

Includes Projections for Incurred, but Not Yet Reported (IBNR or CMPL)

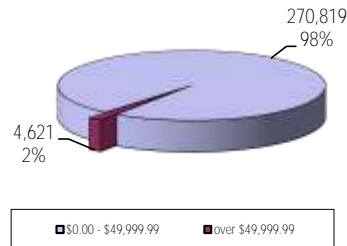
Enrollment

Fact	Nov 2013 - Oct 2014	Nov 2012 - Oct 2013	% Change
Employees Avg Med	151,186	154,144	-1.92%
Members Avg Med	264,404	267,687	-1.23%
Family Size Avg	1.7	1.7	0.71%
Member Age Avg	37.1	37.2	-0.12%

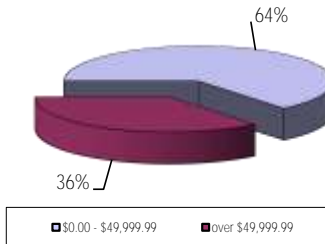
High Cost Claimants

Nov 13—Oct 14

% of High Cost Patients



% of Total Net Payments (Med and Rx)

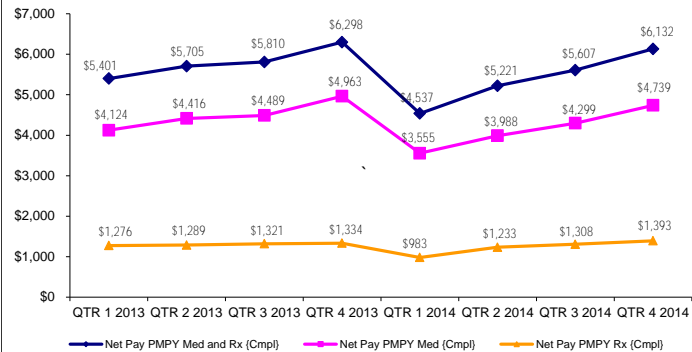


Prescription Drug Programs

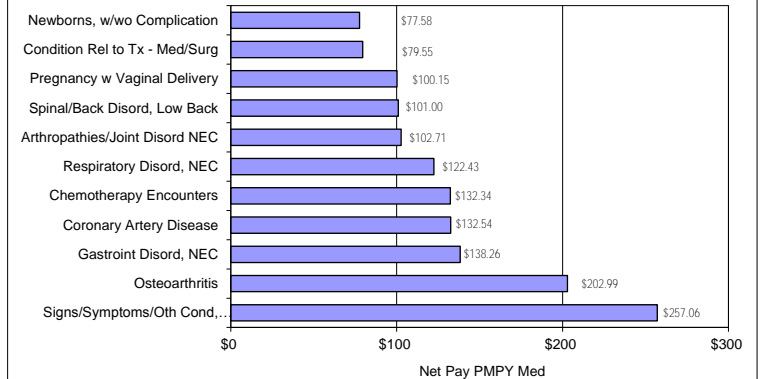
	Fact	Nov 2012 - Oct 2013	Nov 2013 - Oct 2014	% Change
Mail Order	Discount Off AWP % Rx	52.63%	58.58%	11.31%
	Scripts Generic Efficiency Rx	93.63%	94.13%	0.53%
Retail	Discount Off AWP % Rx	49.49%	61.86%	24.98%
	Scripts Generic Efficiency Rx	94.23%	94.81%	0.62%
Total	Discount Off AWP % Rx	50.20%	61.11%	21.74%
	Scripts Generic Efficiency Rx	94.17%	94.73%	0.60%
	Scripts Maint Rx % Mail Order	12.65%	15.10%	19.35%

Net Incurred Claims Cost per Member

(PMPY Costs as Calculated at the end of each Quarter)



Top 10 Clinical Conditions



Allowed Claims Costs PMPY with Norms

	Nov 2012 - Oct 2013	Nov 2013 - Oct 2014	% Change	Recent US Norm	Comp to Norm
Allow Amt PMPY Med {Cmpl}	\$5,058.46	\$4,957.87	-2%	\$4,410.13	11.05%
Allow Amt PMPY IP Acute {Cmpl}	\$1,418.06	\$1,418.01	0%	N/A	N/A
Allow Amt PMPY OP Med {Cmpl}	\$3,615.12	\$3,514.57	-3%	\$3,063.84	12.82%
Allow Amt PMPY OP Fac Med {Cmpl}	\$2,004.11	\$1,960.64	-2%	N/A	N/A
Allow Amt PMPY Office Med {Cmpl}	\$968.11	\$898.37	-7%	N/A	N/A
Allow Amt PMPY OP Lab {Cmpl}	\$345.91	\$335.74	-3%	N/A	N/A
Allow Amt PMPY OP Rad {Cmpl}	\$543.08	\$512.97	-6%	N/A	N/A
Out of Pocket PMPY Med {Cmpl}	\$543.94	\$735.25	35%	\$581.45	20.92%
Allow Amt PMPY Rx {Cmpl}	\$1,577.34	\$1,518.90	-4%	\$1,084.16	28.62%
Out of Pocket PMPY Rx {Cmpl}	\$262.77	\$305.22	16%	\$0.00	N/A

Cost Drivers Support

Fact	Nov 2012 - Oct 2013	Nov 2013 - Oct 2014	% Change
Allow Amt Per Day Adm Acute	\$4,427.77	\$4,641.64	4.83%
Days Per 1000 Adm Acute	314.45	295.81	-5.93%
Allow Amt Per Visit OP Fac Med	\$1,056.41	\$1,127.75	6.75%
Visits Per 1000 OP Fac Med	1,897.09	1,730.67	-8.77%
Allow Amt Per Visit OP Fac Med	\$116.99	\$118.85	1.59%
Visits Per 1000 Office Med	8,275.29	7,519.18	-9.14%
Allow Amt Per Day Supply Rx	\$2.74	\$2.65	-3.22%
Days Supply PMPY Rx	575.62	572.76	-0.50%

Cost Drivers—Utilization and Price Trends

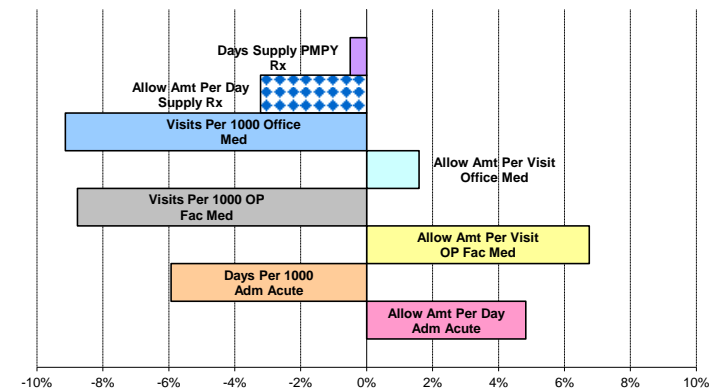


Table of Contents

Introduction..	4
Overview.....	4
Definitions.....	5
Enrollment	6-8
Claims Costs	9-15
Medical Claims Utilization	16
Analysis of Deductibles.....	17-18
Analysis of Individuals and Families Meeting their Out of Pocket Expenses	19-22
Premium (or Premium Equivalent).....	23
Rx Utilization.....	24-28
Utilization	29-30
Claims Lag Analysis	31-32
Claims Distribution based on Age/Gender.....	33
Allowed Amount Distribution	34
Summary of Enrollment and Claims	35

Introduction

The Department of Employee Insurance (DEI) is pleased to provide an analysis of the Kentucky Employees' Health Plan. In response to requests for data analysis, this report has been prepared to provide information related to enrollment, claims payment, and utilization.

It is the Department's intent to update this information on a monthly basis in an effort to provide current information about Kentucky's Health Insurance Program.

Overview

This report is compiled using Medstat, which is DEI's health insurance information management system. Medstat warehouses enrollment and claims data. Enrollment data is provided by DEI while claims data is provided by each carrier and/or TPA.

Claims information may be analyzed by either "incurred" or "paid" dates. "Incurred" reports specify paid amounts for claims that were incurred in a specified timeframe. Due to the lag time in submittal and payment of claims, historical reports that are based on incurred claims may change significantly with each new database update since additional incurred claims will be added. "Paid" claims reports specify the paid amount for claims regardless of when the claims may have been incurred. Unless otherwise specified, data contained in this report are based on "incurred" claims.

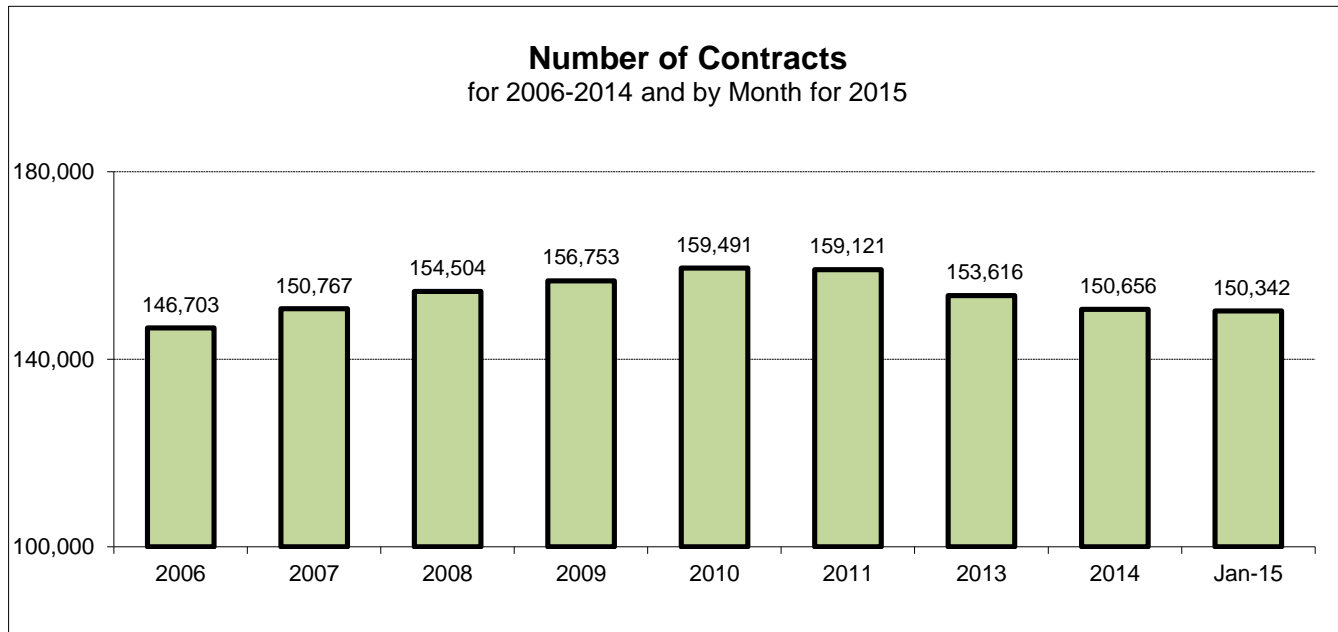
Enrollment in the KEHP changes on a daily basis due to a variety of reasons such as: new hires, adding dependents, dropping dependents, marriage, divorce, becoming Medicare eligible, etc. Therefore, Medstat is dealing with a fluid enrollment base. Also, each carrier processes claims slightly differently. During 2012 Medstat processed enrollment information for a total of 270,404 members as well as 8,891,904 claims (3,894,285 Medical claims and 4,997,619 prescriptions) from different carriers. When dealing with such large numbers it is impossible to tag every claim to a corresponding group, carrier, service type, etc. While the tagging rate for the KEHP data exceeds 99%, you may still see information on reports stated as "~Missing". This indicates any enrollment or claims that could not be "tagged" by Medstat.

Definitions

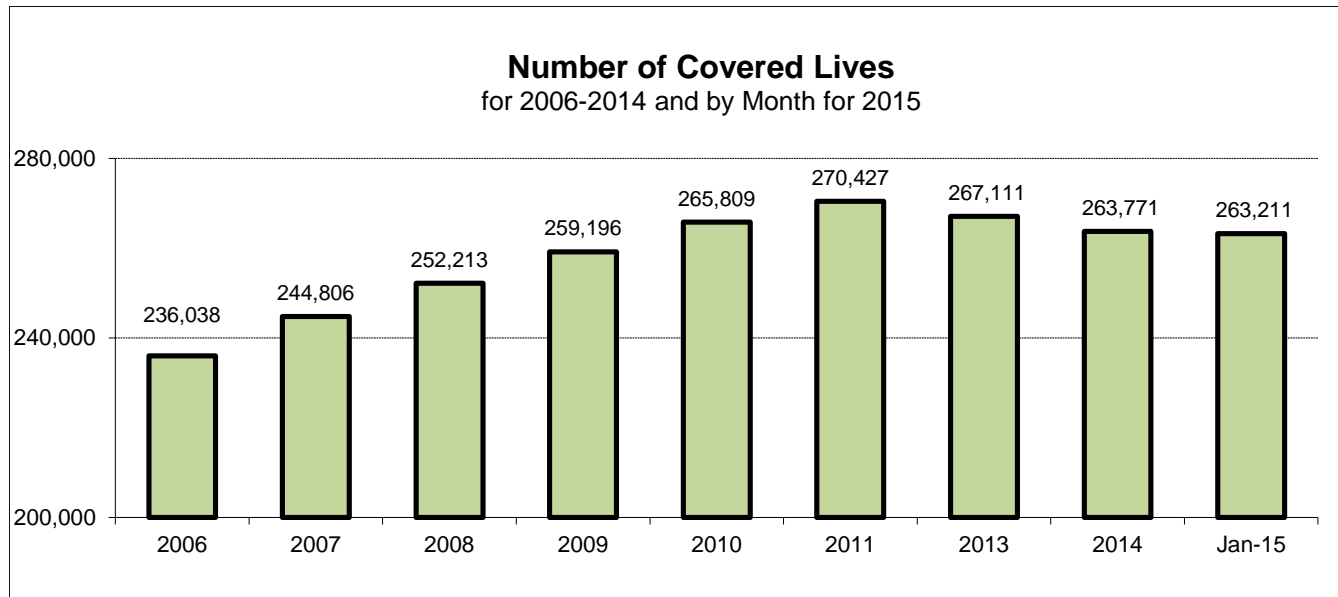
- **Employee** represents an individual eligible to participate in KEHP as a retiree in either KTRS or KRS, or by being employed by one of the agencies that participate with KEHP (example: state employee, school boards, Quasi agency, etc.). Employee may also be referred to as “planholder” or “contracts”. Please note that Medstat deals with Cross-reference plans uniquely. Although there are in fact two “employees” Medstat can only designate the planholder as an employee. Therefore, the cross-referenced spouse is considered a dependent and all claims and utilization data related to them is counted as a “member”.
- **Member** includes all employees plus any dependents that are covered through the KEHP. Members may also be referred to as “covered lives”.
- **Group** is Kentucky Retirement System (KRS), Kentucky Teachers Retirement System (KTRS), State Employees, School Boards, or Other (includes: COBRA, Health Departments, KCTCS, Quasi/Local Governments).
- **Plan** is Standard PPO, Capitol Choice, Optimum PPO, Maximum Choice, Commonwealth Essential, Commonwealth Enhanced, Commonwealth Premier, or Commonwealth Select.
- **Carrier** is claims listed by carrier. (Please note that Express Scripts data is designated as Humana).
- **Generic Efficiency** means the number of prescriptions that are filled with a generic product as a percentage of the total number of prescriptions where a generic is available.
- **OOP** is the amount paid out-of-pocket by the member for facility, professional, and prescription drug services. This generally includes coinsurance, co-payment, and deductible amounts.
- **Allowed Amount** is the amount of submitted charges eligible for payment for all claims. It is the amount eligible after applying pricing guidelines, but before deducting third party, co-payment, coinsurance, or deductible amounts.
- **Net Payment** is the net amount paid for all claims. It represents the amount after all pricing guidelines have been applied, and all third party, co-payment, coinsurance, and deductible amounts have been subtracted.
- **Patients** is the unique count of members who received facility, professional, or pharmacy services.
- **Days Supply** is the number of days for which drugs were supplied for prescriptions filled. It represents the number of days of drug therapy covered by a prescription.
- **Mail Order** is computed as any script filled with a “days supply” of more than 30 days, regardless of the physical location where the prescription was filled.
- **Retail** is computed as any script filled with a “days supply” of 30 days or less, regardless of the physical location where the prescription was filled.

Enrollment

The following chart shows planholder enrollment (contracts) for 2006-2014 and monthly year-to-date for 2015. Enrollment will fluctuate on a monthly basis (Approximately 8,000 cross-referenced spouses in any given month are not included)

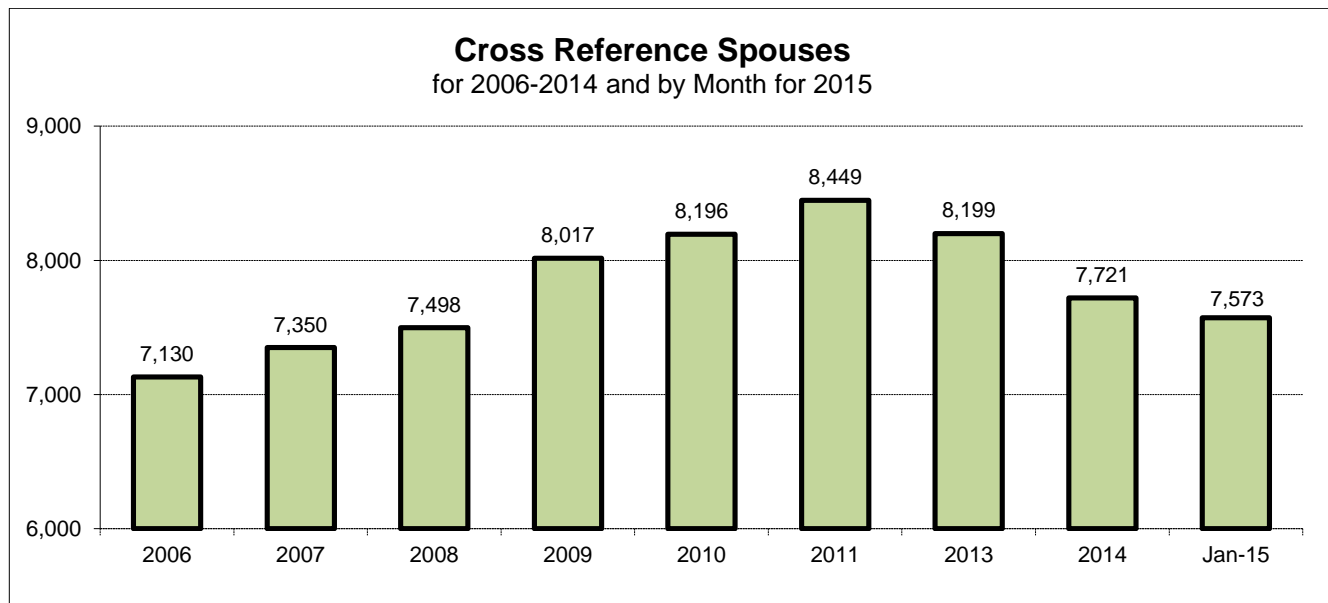


The following chart shows member enrollment (covered lives) for 2006-2014 and monthly year-to-date for 2015. Enrollment will fluctuate on a monthly basis.



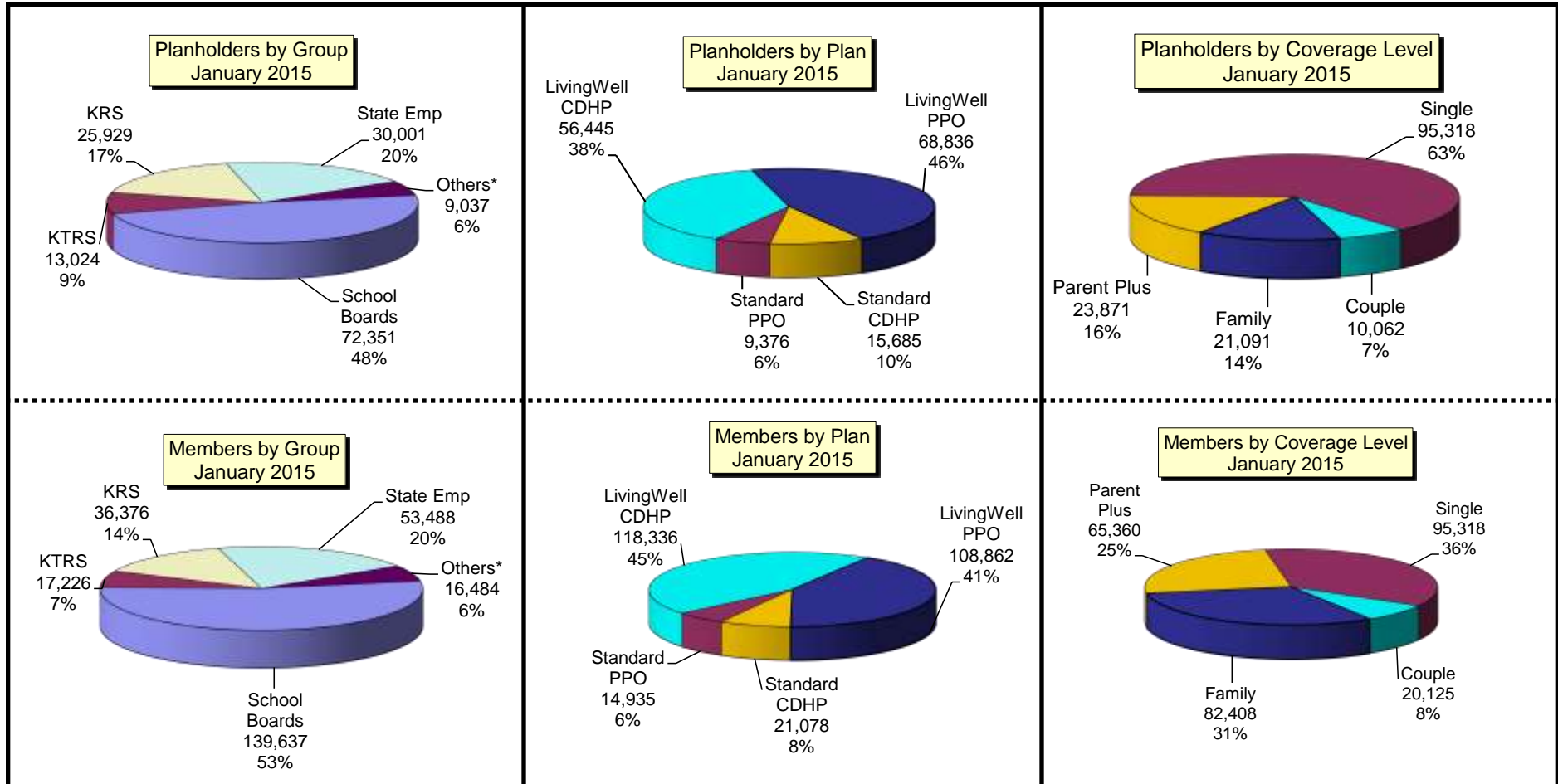
Enrollment *(continued)*

The following graph shows the number of cross-reference spouses for 2006-2014 and monthly year-to-date for 2015. The number of Cross Referenced Spouses will fluctuate on a monthly basis.



Enrollment *(continued)*

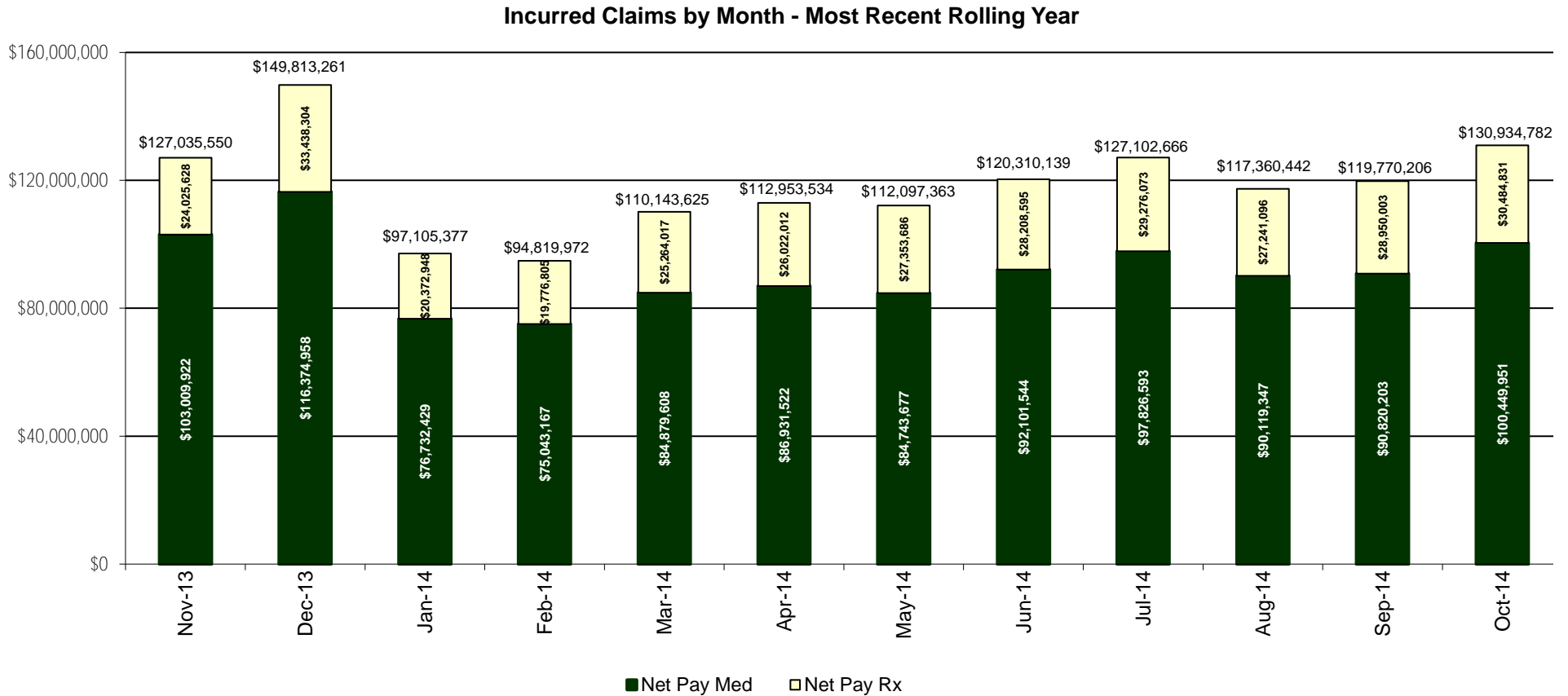
The following charts show Planholder and Member enrollment by group, plan, and coverage level.



* Others include Cobra, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).

Claims Costs

Claims costs include Medical and Prescription (Rx) for the most recent rolling year. Based on Incurred Claims.



Claims Costs *(continued)*

The following tables represent incurred claims by Group for 2006 - 2014 and monthly year-to-date for 2015.

INCURRED MEDICAL CLAIMS (no Rx) by Group:

	School Boards	KTRS	KRS	State Employees	Others*	Totals
2006	\$307,404,829	\$93,874,833	\$147,000,881	\$151,118,572	\$48,943,683	\$748,342,797
2007	\$335,233,747	\$96,138,953	\$156,119,263	\$147,816,830	\$50,969,860	\$786,278,653
2008	\$402,843,851	\$109,319,917	\$194,688,095	\$178,641,561	\$64,333,716	\$949,827,140
2009	\$427,644,878	\$123,944,338	\$220,434,791	\$177,195,445	\$68,628,440	\$1,017,847,892
2010	\$467,251,898	\$134,399,726	\$218,395,487	\$193,151,301	\$79,182,411	\$1,092,380,824
2011	\$475,939,979	\$137,632,074	\$239,407,280	\$200,932,917	\$80,536,373	\$1,134,448,624
2012	\$507,719,662	\$138,128,054	\$243,196,827	\$206,823,486	\$90,053,828	\$1,185,921,858
2013	\$523,935,738	\$134,444,267	\$232,469,175	\$214,293,374	\$96,166,342	\$1,201,308,895
Jan 2014	\$31,381,277	\$8,247,010	\$16,175,743	\$14,453,166	\$6,475,233	\$76,732,429
Feb 2014	\$29,908,826	\$8,458,362	\$15,126,251	\$14,894,183	\$6,655,546	\$75,043,167
Mar 2014	\$35,367,625	\$9,503,465	\$16,534,981	\$16,818,212	\$6,655,325	\$84,879,608
Apr 2014	\$37,345,904	\$9,827,457	\$17,013,721	\$16,071,128	\$6,673,311	\$86,931,522
May 2014	\$35,350,803	\$10,049,610	\$17,367,928	\$14,714,114	\$7,261,222	\$84,743,677
Jun 2014	\$43,107,903	\$9,569,929	\$16,083,912	\$15,126,114	\$8,213,687	\$92,101,544
Jul 2014	\$45,590,450	\$10,363,147	\$17,750,099	\$16,457,558	\$7,665,339	\$97,826,593
Aug 2014	\$36,511,061	\$10,657,951	\$18,197,490	\$17,396,942	\$7,355,903	\$90,119,347
Sep 2014	\$35,636,928	\$10,402,272	\$19,991,819	\$17,221,075	\$7,568,109	\$90,820,203
Oct 2014	\$41,998,431	\$11,250,847	\$20,893,849	\$18,546,520	\$7,760,303	\$100,449,951

* Others include Cobra, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).

Claims Costs *(continued)*

The following tables represent incurred claims by Group for 2006 - 2014 and monthly year-to-date for 2015.

INCURRED Rx CLAIMS (no Med) by Group:

	School Boards	KTRS	KRS	State Employees	Others*	Totals
2006	\$92,676,509	\$35,017,335	\$53,095,577	\$42,857,791	\$13,481,498	\$237,128,711
2007	\$102,883,195	\$37,889,011	\$61,585,393	\$46,102,562	\$15,361,507	\$263,821,668
2008	\$114,318,657	\$42,211,258	\$72,457,449	\$51,523,178	\$17,638,869	\$298,149,411
2009	\$119,002,425	\$45,308,689	\$82,234,684	\$50,881,577	\$18,339,245	\$315,766,619
2010	\$129,624,203	\$49,399,459	\$89,783,758	\$55,125,407	\$21,022,918	\$344,955,745
2011	\$126,659,101	\$48,675,489	\$92,082,668	\$54,232,323	\$20,434,256	\$342,083,837
2012	\$133,982,546	\$50,751,278	\$88,779,442	\$58,569,956	\$21,662,392	\$353,745,613
2013	\$138,493,543	\$50,459,719	\$77,584,954	\$59,628,699	\$22,363,087	\$348,530,002
Jan 2014	\$8,118,693	\$2,625,224	\$5,012,928	\$3,362,304	\$1,253,800	\$20,372,948
Feb 2014	\$7,942,830	\$2,464,209	\$4,728,406	\$3,300,624	\$1,340,736	\$19,776,805
Mar 2014	\$10,134,261	\$3,246,372	\$6,135,273	\$4,186,968	\$1,561,143	\$25,264,017
Apr 2014	\$10,560,807	\$3,235,875	\$5,938,312	\$4,579,768	\$1,707,249	\$26,022,012
May 2014	\$11,200,787	\$3,494,869	\$6,126,734	\$4,604,582	\$1,926,713	\$27,353,686
Jun 2014	\$11,686,548	\$3,722,405	\$6,253,429	\$4,760,192	\$1,786,021	\$28,208,595
Jul 2014	\$11,737,975	\$3,994,558	\$6,544,906	\$5,171,964	\$1,826,670	\$29,276,073
Aug 2014	\$11,003,544	\$3,628,098	\$6,090,937	\$4,732,202	\$1,786,316	\$27,241,096
Sep 2014	\$11,458,915	\$4,079,613	\$6,570,721	\$5,030,020	\$1,810,734	\$28,950,003
Oct 2014	\$12,256,277	\$4,158,569	\$6,914,074	\$5,234,314	\$1,921,597	\$30,484,831

* Others include Cobra, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).

Claims Costs *(continued)*

The following tables represent incurred claims by Plan for 2009-2014 and monthly year-to-date for 2015.

INCURRED MEDICAL CLAIMS (no Rx) by PLAN:

Time Period	Capitol Choice	Maximum Choice	Optimum PPO	CW Standard PPO	Standard PPO	Standard CDHP	LivingWell PPO	LivingWell CDHP	Missing*	Total
2009	\$115,052,390	\$44,250,277	\$839,555,872	\$14,550,862					\$4,290,752	\$1,017,847,892
2010	\$120,801,466	\$56,099,090	\$893,370,461	\$15,244,745					\$6,865,062	\$1,092,380,824
2011	\$145,752,975	\$71,531,690	\$872,004,689	\$39,637,013					\$5,522,257	\$1,134,448,624
2012	\$159,388,594	\$75,620,676	\$887,355,980	\$53,531,903	(\$83)	(\$1,306)	(\$277)	\$0	\$10,026,371	\$1,185,923,870
2013	\$157,538,052	\$78,530,181	\$876,354,347	\$64,890,864	\$128,768	\$89,853	\$559,928	\$747,112	\$22,469,789	\$1,201,310,908
Jan-14	\$1,198	\$529	\$68,841	\$15,221	\$3,719,714	\$4,101,100	\$44,340,437	\$22,563,602	\$1,921,787	\$76,774,069
Feb-14	\$0	\$0	\$0	\$0	\$4,297,081	\$2,958,207	\$42,881,975	\$23,222,941	\$1,682,962	\$75,084,838
Mar-14	\$0	\$0	\$0	\$0	\$4,305,409	\$3,330,676	\$47,836,854	\$27,685,509	\$1,721,161	\$84,921,307
Apr-14	\$0	\$0	\$0	\$0	\$4,934,276	\$3,681,684	\$48,726,371	\$28,338,173	\$1,251,018	\$86,973,252
May-14	\$0	\$0	\$0	\$0	\$4,320,667	\$3,209,033	\$48,110,480	\$27,516,715	\$1,586,783	\$84,785,437
Jun-14	\$0	\$0	\$0	\$0	\$4,467,204	\$3,983,350	\$50,253,580	\$31,866,785	\$1,530,626	\$92,143,335
Jul-14	\$0	\$0	\$0	\$0	\$5,041,598	\$3,698,087	\$52,448,516	\$34,904,280	\$1,734,112	\$97,868,414
Aug-14	\$0	\$0	\$0	\$0	\$5,124,604	\$3,633,244	\$47,759,697	\$31,883,454	\$1,718,348	\$90,161,199
Sep-14	\$0	\$0	\$0	\$0	\$5,034,937	\$3,733,403	\$49,180,018	\$31,306,284	\$1,565,561	\$90,862,086
Oct-14	\$0	\$0	\$0	\$0	\$5,121,629	\$4,205,108	\$54,646,712	\$34,951,012	\$1,525,491	\$100,491,864

*Missing means the claims could not be tagged to a specific plan.

Claims Costs *(continued)*

The following tables represent incurred claims by Plan for 2006-2014 and monthly year-to-date for 2015.

INCURRED Rx CLAIMS (no Med) by PLAN:

Time Period	Capitol Choice	Maximum Choice	Optimum PPO	CW Standard PPO	Standard PPO	Standard CDHP	LivingWell PPO	LivingWell CDHP	Missing*	Total
2009	\$35,845,894	\$7,804,096	\$267,798,635	\$3,632,729					\$627,662	\$315,766,619
2010	\$37,400,953	\$10,541,054	\$292,411,029	\$3,839,193					\$763,517	\$344,955,745
2011	\$44,303,915	\$13,658,792	\$275,615,919	\$8,069,769					\$435,441	\$342,083,836
2012	\$47,435,900	\$14,365,499	\$280,629,229	\$10,764,274					\$550,712	\$353,745,613
2013	\$45,895,705	\$15,356,622	\$273,117,226	\$14,028,700	\$1,173	\$12,312	\$68,807	\$9,545	\$39,912	\$348,530,002
Jan-14	\$3,038	\$219	\$31,693	\$3,027	\$1,325,497	\$138,383	\$16,582,596	\$2,260,937	\$27,558	\$20,372,948
Feb-14	\$0	\$0	\$0	\$0	\$1,315,953	\$217,451	\$14,536,494	\$3,679,577	\$27,330	\$19,776,805
Mar-14	\$0	\$0	\$0	\$0	\$1,349,350	\$380,338	\$18,665,679	\$4,795,814	\$72,836	\$25,264,017
Apr-14	\$0	\$0	\$0	\$0	\$1,453,115	\$400,174	\$18,262,230	\$5,851,794	\$54,700	\$26,022,012
May-14	\$0	\$0	\$0	\$0	\$1,502,761	\$520,623	\$18,541,758	\$6,754,118	\$34,425	\$27,353,686
Jun-14	\$0	\$0	\$0	\$0	\$1,416,128	\$489,712	\$18,904,859	\$7,366,220	\$31,675	\$28,208,595
Jul-14	\$0	\$0	\$0	\$0	\$1,564,622	\$549,172	\$18,916,814	\$8,221,397	\$24,068	\$29,276,073
Aug-14	\$0	\$0	\$0	\$0	\$1,513,930	\$507,344	\$17,578,381	\$7,621,929	\$19,512	\$27,241,096
Sep-14	\$0	\$0	\$0	\$0	\$1,604,876	\$537,258	\$18,357,762	\$8,427,324	\$22,782	\$28,950,003
Oct-14	\$0	\$0	\$0	\$0	\$1,547,477	\$832,978	\$19,111,441	\$8,970,270	\$22,666	\$30,484,831

**Missing means the claims could not be tagged to a specific plan.*

Claims Costs *(continued)*

The following represents incurred medical claims only (does not include Rx) by Coverage Level for 2006-2014 and monthly year-to-date for 2015.

INCURRED MEDICAL CLAIMS (no Rx) by Coverage Level:

Time Period	Couple	Family	Parent Plus	Single	Unknown*	Total
2006	\$105,900,696	\$142,637,212	\$104,245,315	\$391,585,566	\$3,974,007	\$748,342,797
2007	\$123,989,294	\$160,349,021	\$118,430,067	\$447,682,122	\$3,721,482	\$854,171,987
2008	\$138,340,738	\$179,204,916	\$138,984,028	\$489,769,922	\$3,527,536	\$949,827,140
2009	\$148,834,766	\$197,496,335	\$148,195,132	\$519,153,082	\$4,168,576	\$1,017,847,892
2010	\$161,490,560	\$207,327,688	\$168,831,673	\$547,945,617	\$6,785,286	\$1,092,380,824
2012	\$159,858,481	\$246,981,240	\$194,208,304	\$574,964,827	\$9,909,006	\$1,185,921,858
2013	\$145,599,352	\$250,713,913	\$205,905,410	\$583,597,154	\$15,493,066	\$1,201,308,895
Jan 2014	\$9,202,535	\$15,764,046	\$12,699,085	\$37,714,913	\$1,351,850	\$76,732,429
Feb 2014	\$9,060,577	\$14,659,356	\$14,033,006	\$36,241,593	\$1,048,636	\$75,043,167
Mar 2014	\$10,887,411	\$16,566,665	\$14,610,039	\$41,618,250	\$1,197,243	\$84,879,608
Apr 2014	\$10,641,706	\$17,444,143	\$14,616,849	\$43,444,089	\$784,735	\$86,931,522
May 2014	\$10,308,455	\$17,698,953	\$13,995,230	\$41,786,840	\$954,198	\$84,743,677
Jun 2014	\$10,770,456	\$19,181,503	\$15,631,439	\$45,530,971	\$987,174	\$92,101,544
Jul 2014	\$10,790,457	\$22,115,019	\$16,819,086	\$46,906,965	\$1,195,065	\$97,826,593
Aug 2014	\$10,797,424	\$20,407,255	\$14,421,697	\$43,257,953	\$1,235,017	\$90,119,347
Sep 2014	\$11,908,863	\$19,929,281	\$14,400,229	\$43,534,137	\$1,047,694	\$90,820,203
Oct 2014	\$12,152,973	\$22,647,262	\$15,573,944	\$49,071,901	\$1,003,870	\$100,449,951

**Unable to tag claims to a specific coverage level*

Claims Costs *(continued)*

The following represents incurred RX claims only (does not include medical) by Coverage Level for 2006-2014 and monthly year-to-date for 2015.

INCURRED Rx CLAIMS (no Med) by Coverage Level:

Time Period	Couple	Family	Parent Plus	Single	Unknown*	Total
2006	\$38,228,159	\$43,809,856	\$25,948,520	\$128,164,514	\$977,662	\$237,128,711
2007	\$42,590,719	\$49,329,230	\$29,736,616	\$141,680,238	\$484,865	\$263,821,668
2008	\$48,563,951	\$54,628,661	\$34,879,637	\$159,504,290	\$572,873	\$298,149,411
2009	\$51,545,047	\$59,726,568	\$37,315,867	\$166,599,775	\$579,363	\$315,766,619
2010	\$57,195,759	\$64,920,207	\$41,129,813	\$180,993,674	\$716,292	\$344,955,745
2011	\$55,944,577	\$66,704,498	\$43,290,721	\$175,791,341	\$352,568	\$342,083,705
2012	\$54,761,601	\$70,977,720	\$47,931,247	\$179,708,246	\$366,800	\$353,745,613
2013	\$50,194,319	\$72,142,316	\$51,138,401	\$175,085,266	-\$30,300	\$348,530,002
Jan-14	\$2,805,898	\$3,715,036	\$2,931,768	\$10,894,611	\$25,634	\$20,372,948
Feb-14	\$2,639,197	\$3,982,084	\$2,819,781	\$10,312,254	\$23,489	\$19,776,805
Mar-14	\$3,732,856	\$4,976,205	\$3,565,987	\$12,917,272	\$71,696	\$25,264,017
Apr-14	\$3,700,975	\$5,471,493	\$3,412,757	\$13,384,120	\$52,667	\$26,022,012
May-14	\$3,946,208	\$5,733,369	\$3,734,035	\$13,906,525	\$33,549	\$27,353,686
Jun-14	\$4,113,714	\$5,770,679	\$3,905,153	\$14,394,302	\$24,748	\$28,208,595
Jul-14	\$4,101,270	\$6,236,535	\$3,894,941	\$15,021,279	\$22,049	\$29,276,073
Aug-14	\$3,759,259	\$6,013,399	\$3,762,717	\$13,691,845	\$13,875	\$27,241,096
Sep-14	\$4,131,137	\$6,043,095	\$4,097,304	\$14,658,287	\$20,180	\$28,950,003
Oct-14	\$4,191,497	\$6,393,973	\$4,464,943	\$15,419,083	\$15,336	\$30,484,831

**Unable to tag claims to a specific coverage level*

Medical Claims Utilization

The following is based on medical claims* (does not include Rx) incurred for January—October 2014.

Commonwealth Plan	Admits Per 1000 Acute	Admits Per 1000 Acute Rcnt Sgovt	%Diff from {Rcnt SGovt}	Days LOS Admit Acute	Days LOS Admit Acute Rcnt Sgovt	%Diff from Rcnt SGovt	Days Per 1000 Adm Acute	Days Per 1000 Adm Acute Rcnt Sgovt	%Diff from Rcnt Sgovt
LivingWell CDHP	61.12	57.41	6.45%	3.78	4.70	-19.53%	231.18	235.41	-1.80%
LivingWell PPO	72.92	61.45	18.67%	4.30	5.24	-18.03%	313.36	262.93	19.18%
Standard CDHP	46.61	58.72	-20.63%	4.62	5.45	-15.22%	215.21	243.87	-11.75%
Standard PPO	63.37	62.25	1.81%	4.70	5.81	-18.96%	298.16	269.03	10.83%
Average	65.67	59.68	10.03%	4.15	5.08	-18.46%	272.28	250.88	8.53%

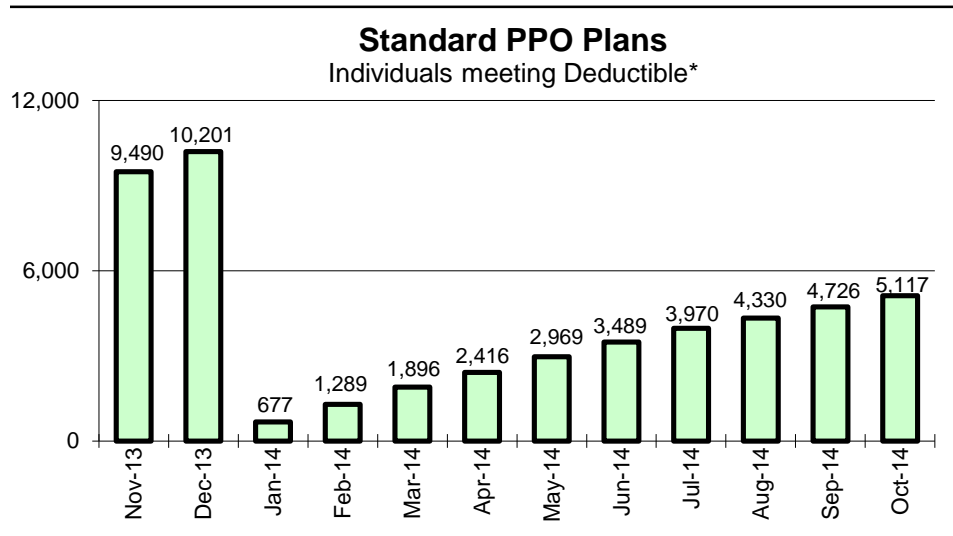
Commonwealth Plan	Visits Per 1000 Office Med	Visits Per 1000 Office Med Rcnt Sgovt	%Diff from Rcnt SGovt	Visits Per 1000 ER	Visits Per 1000 ER Rcnt Sgovt	%Diff from Rcnt Sgovt
LivingWell CDHP	6,820.08	7,126.67	-4.30%	191.07	232.33	-17.76%
LivingWell PPO	8,315.67	7,903.38	5.22%	237.17	233.52	1.56%
Standard CDHP	4,035.59	7,390.37	-45.39%	197.02	232.55	-15.28%
Standard PPO	5,679.90	7,803.47	-27.21%	216.86	232.02	-6.53%
Average	7,237.85	7,548.01	-4.11%	214.46	232.88	-7.91%

Commonwealth Plan	Svcs Per 1000 OP Lab	Svcs Per 1000 OP Lab Rcnt US	%Diff from Rcnt US	Svcs Per 1000 OP Rad	Svcs Per 1000 OP Rad Rcnt US	%Diff from Rcnt US
LivingWell CDHP	8,285.08	7,427.54	11.55%	2,243.88	1,956.34	14.70%
LivingWell PPO	12,157.80	8,601.26	41.35%	3,100.65	2,428.81	27.66%
Standard CDHP	6,312.41	8,305.04	-23.99%	1,713.98	2,191.93	-21.80%
Standard PPO	8,549.68	8,614.36	-0.75%	2,284.21	2,363.35	-3.35%
Average	9,950.44	8,109.37	22.70%	2,604.38	2,217.79	17.43%

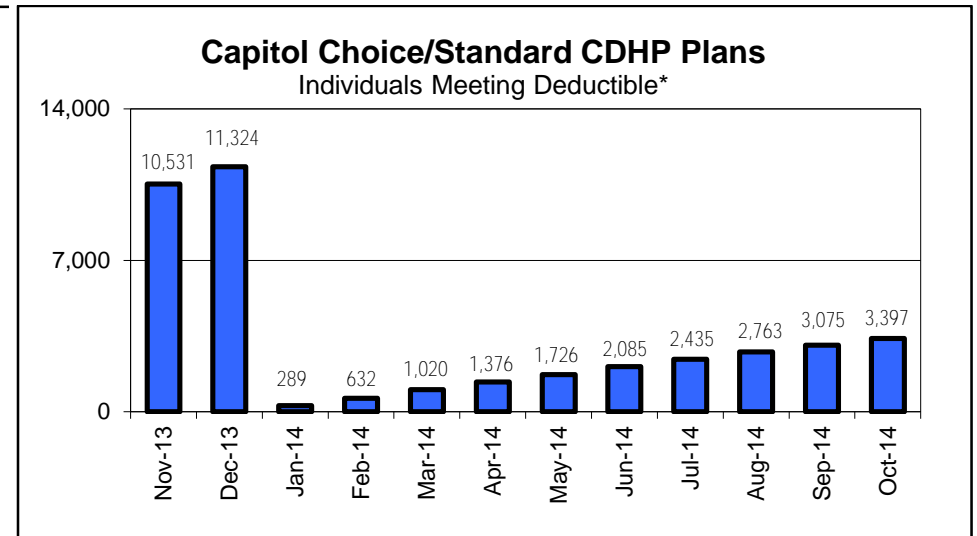
*Services are tracked by each service, not by each visit. Therefore, if two laboratory services are performed at one visit, it will count as two services.

Analysis of Individuals and Families Meeting Their Deductibles

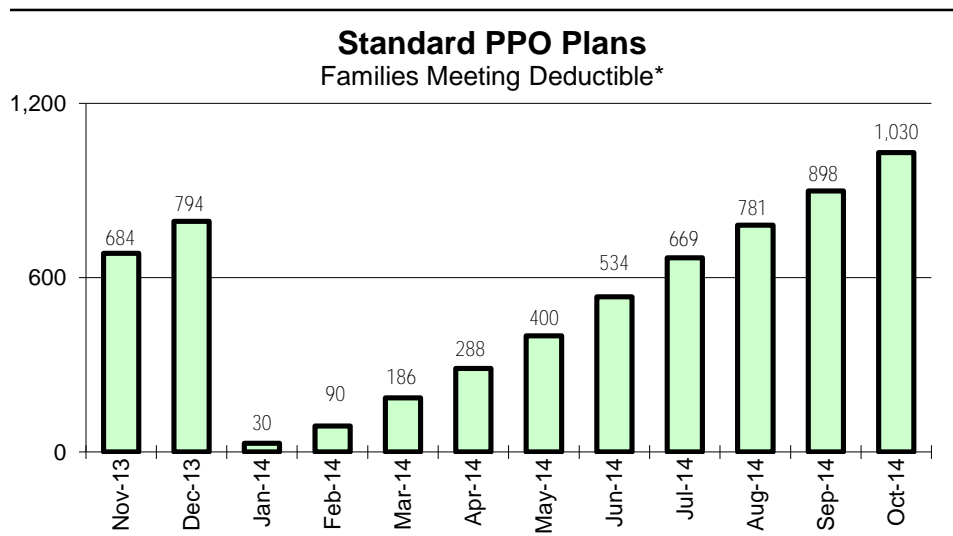
The following details the number of individuals and families by plan that met their deductible for the latest rolling year. This report is based on incurred claims.



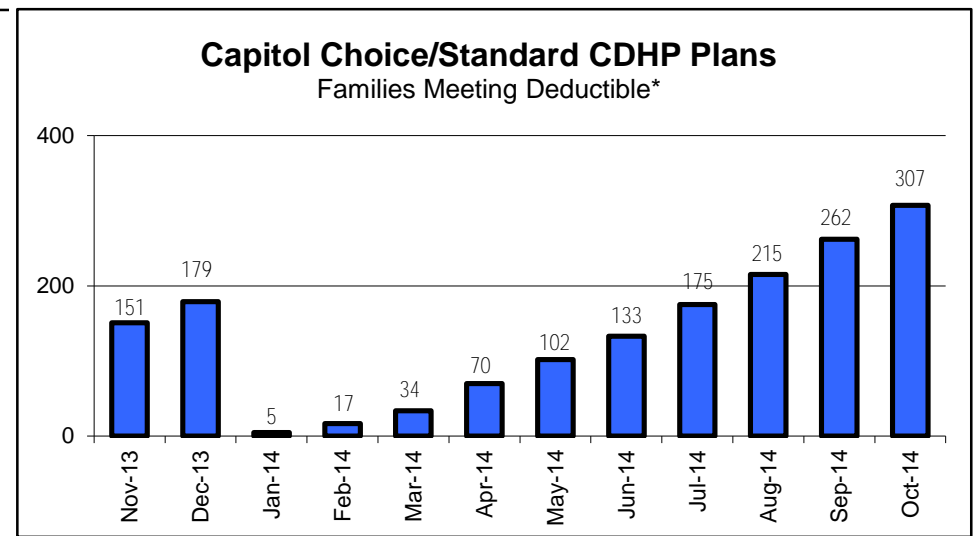
* 2013 Individual Deductible is \$600; 2014 Individual Deductible is \$750



* 2013 Individual Deductible is \$615; 2014 Individual Deductible is \$1,750



* 2013 Family Deductible is \$1,800; 2014 Family Deductible is \$1,500



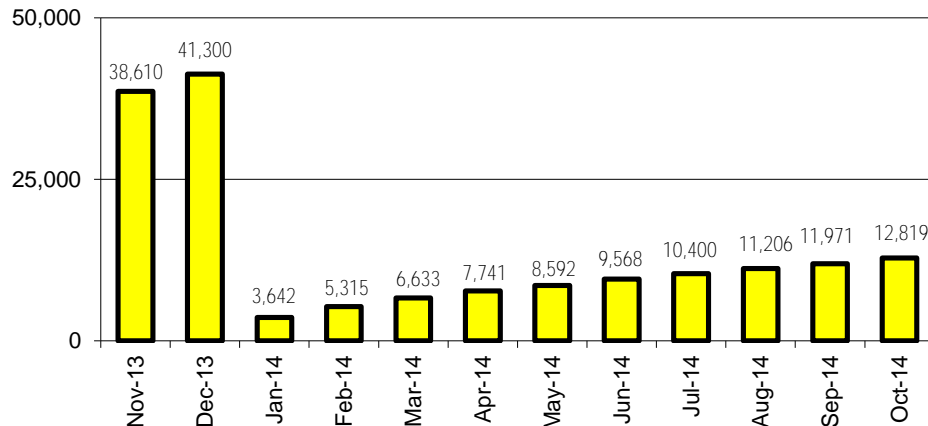
* 2013 Family Deductible is \$1,850; 2014 Family Deductible is \$3,500

Analysis of Individuals and Families Meeting Their Deductibles *(continued)*

The following details the number of individuals and families by plan that met their deductible for the latest rolling year. This report is based on incurred claims.

Optimum PPO/LivingWell PPO Plans

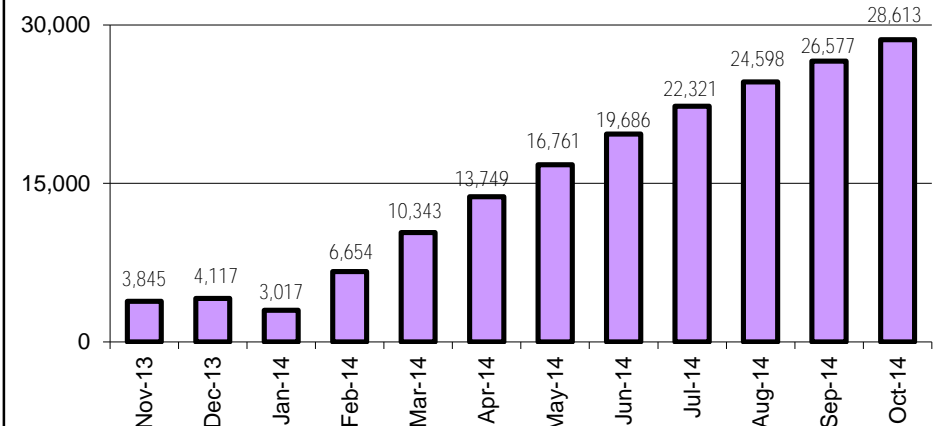
Individuals Meeting Deductible*



* 2013 Individual Deductible is \$370; 2014 Individual Deductible is \$500

Maximum Choice/LivingWell CDHP Plans

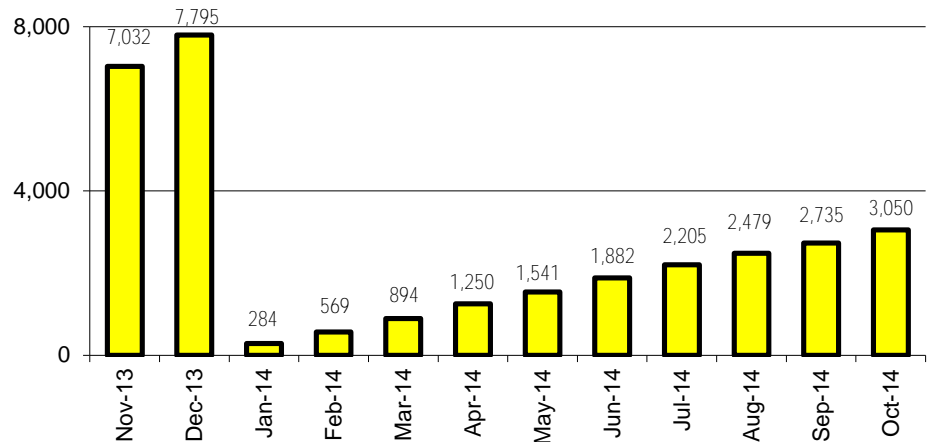
Individuals Meeting Deductible*



* 2013 Individual Deductible is \$2,450; 2014 Individual Deductible is \$1,250

Optimum PPO/LivingWell PPO Plans

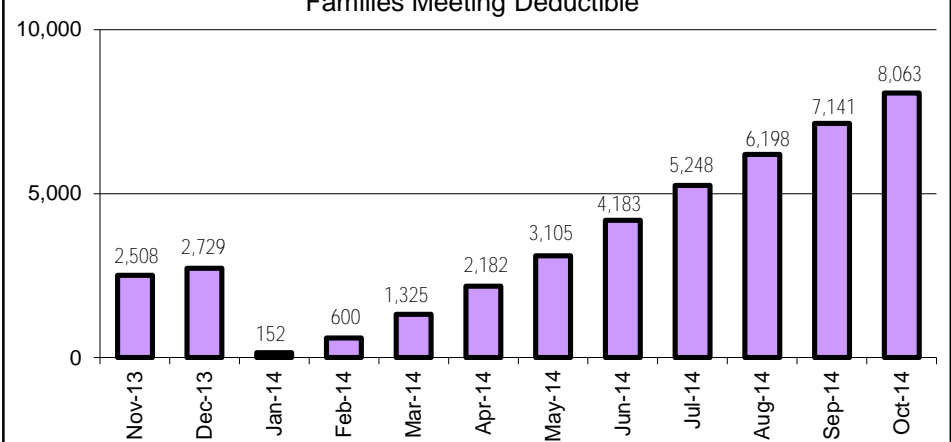
Families Meeting Deductible*



* 2013 Family Deductible is \$740; 2014 Family Deductible is \$1,000

Maximum Choice/LivingWell CDHP Plans

Families Meeting Deductible*



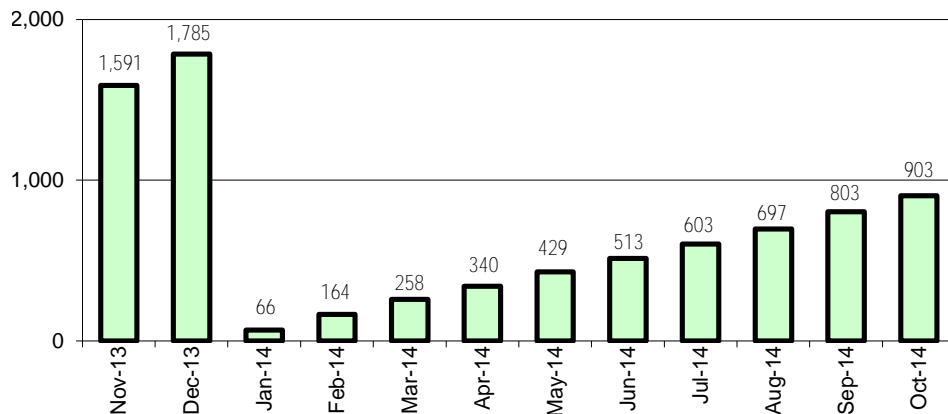
* 2013 Family Deductible is \$3,650; 2014 Family Deductible is \$2,500

Analysis of Individuals and Families Meeting Their Maximum Out of Pocket Expenses *(continued)*

The following details the number of individuals and families by plan that met their maximum out of pocket expense for the latest rolling year. This report is based on incurred claims.

Standard PPO Plans Individuals

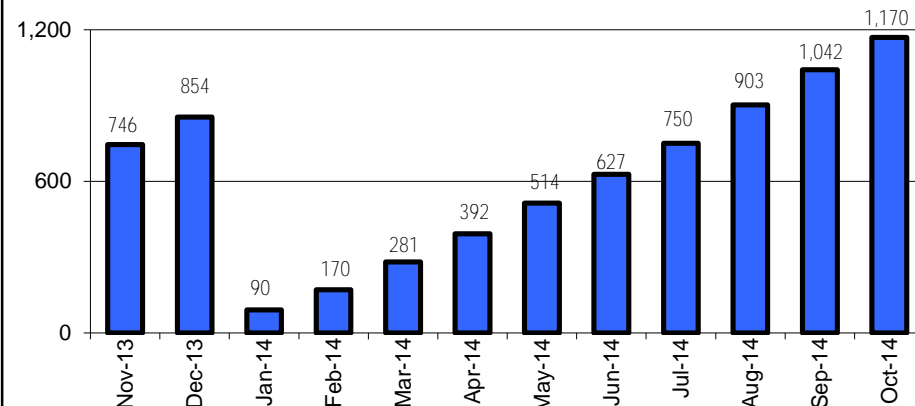
Meeting Maximum Out of Pocket*



* 2013 Individual Maximum Out of Pocket is \$3,000; 2014 Individual Maximum Out of Pocket is \$3,500

Capitol Choice/Standard CDHP Plans Individuals

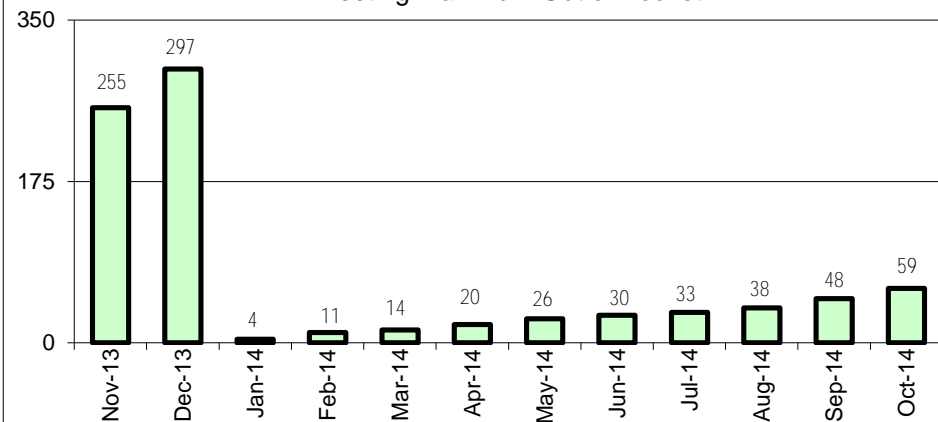
Meeting Maximum Out of Pocket*



* 2013 Individual Maximum Out of Pocket is \$2,470; 2014 Individual Maximum Out of Pocket is \$3,500

Standard PPO Plans Families

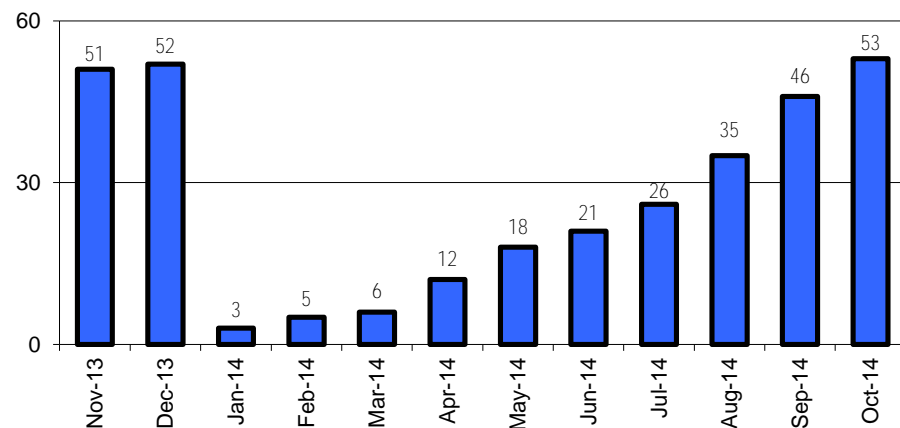
Meeting Maximum Out of Pocket*



* 2013 Family Maximum Out of Pocket is \$6,000; 2014 Maximum Out of Pocket is \$7,000

Capitol Choice/Standard CDHP Plans Families

Meeting Maximum Out of Pocket*

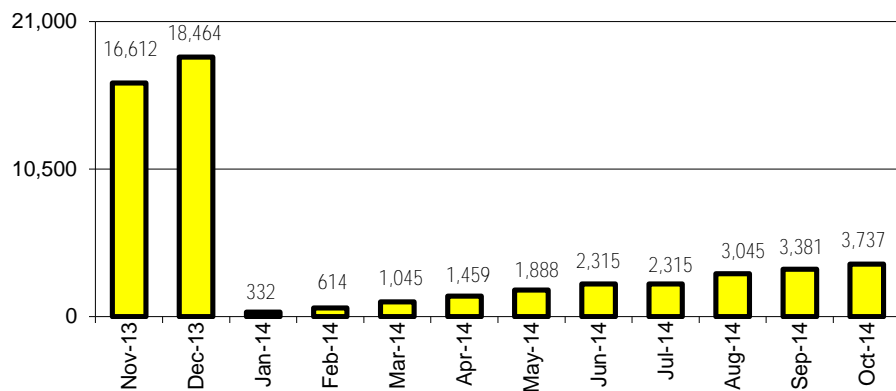


* 2013 Family Maximum Out of Pocket is \$7,400; 2014 Family Maximum Out of Pocket is \$7,000

Analysis of Individuals and Families Meeting Their Maximum Out of Pocket Expenses *(continued)*

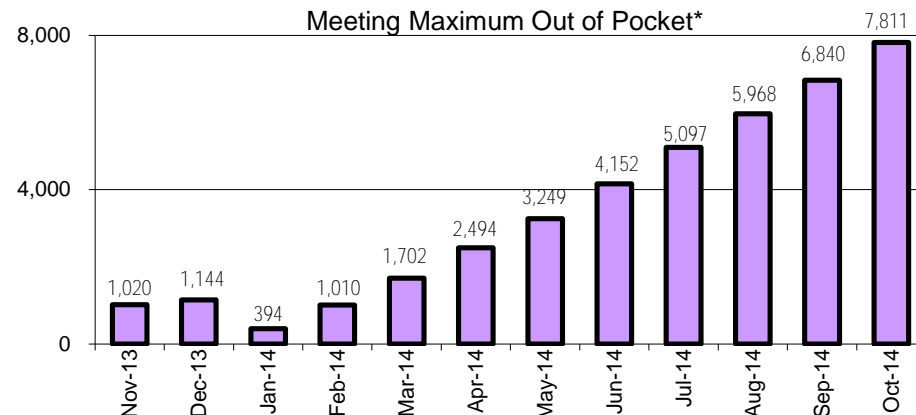
The following details the number of individuals and families by plan that met their maximum out of pocket expense for the latest rolling year. This report is based on incurred claims.

Optimum PPO/LivingWell PPO Plans Individuals
Meeting Maximum Out of Pocket*



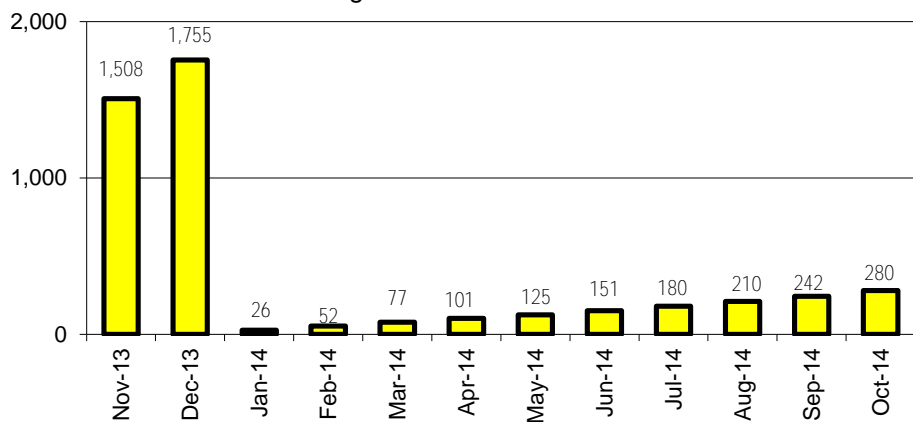
* 2013 Individual Maximum Out of Pocket is \$1,390; 2014 Maximum Out of Pocket is \$2,500

Maximum Choice/LivingWell CDHP Plans
Individuals



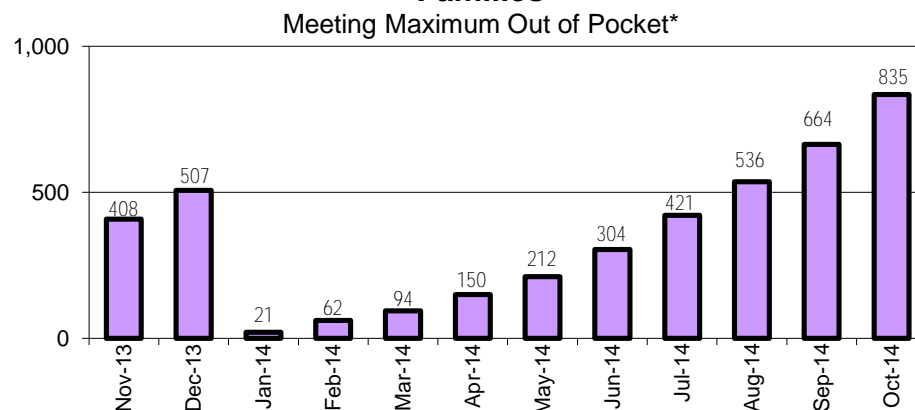
* 2013 Individual Maximum Out of Pocket is \$3,700; 2014 Individual Max Out of Pocket is \$2,500

Optimum PPO/LivingWell PPO Plans Families
Meeting Maximum Out of Pocket*



* 2013 Family Maximum Out of Pocket is \$2,780; 2014 Family Maximum Out of Pocket is \$5,000

Maximum Choice/LivingWell CDHP Plans
Families



* 2012 Family Maximum Out of Pocket is \$5,280; 2013 Family Maximum Out of Pocket is \$5,000

Historical Analysis of Individuals and Families Meeting Their Deductibles and Maximum Out of Pocket Expenses

(continued)

The following details the number of individuals and families by plan that met their deductibles and/or maximum out of pocket (MOOP) expense for the years 2006-2014. This report is based on incurred claims.

Individuals and Families in Essential (2006-08) and CW Standard PPO (2009-13) and Standard PPO (2014—)									
		Individuals				Families			
Plan year	Plan Name	Deductible	Percent Meeting Deductible	Max Out of Pocket	Percent Meeting MOOP	Deductible	Percent Meeting Deductible	Max Out of Pocket	Percent Meeting MOOP
2006	Essential	\$750	22.14%	\$3,500	2.96%	\$1,500	16.35%	\$7,000	1.08%
2007	Essential	\$750	22.41%	\$3,500	3.30%	\$1,500	17.70%	\$7,000	1.16%
2008	Essential	\$750	24.25%	\$3,500	4.01%	\$1,500	19.35%	\$7,000	1.51%
2009	CW Standard PPO	\$750	32.06%	\$3,500	5.85%	\$1,500	8.74%	\$7,000	1.14%
2010	CW Standard PPO	\$500	38.12%	\$3,500	4.81%	\$1,500	3.61%	\$7,000	0.73%
2011	CW Standard PPO	\$500	39.40%	\$3,500	4.55%	\$1,500	3.99%	\$7,000	0.56%
2012	CW Standard PPO	\$500	40.49%	\$3,500	4.80%	\$1,500	4.98%	\$7,000	0.77%
2013	CW Standard PPO	\$600	36.85%	\$3,000	6.45%	\$1,800	4.34%	\$6,000	1.62%
2014	Standard PPO	\$750	30.57%	\$3,500	5.39%	\$1,500	8.88%	\$7,000	0.51%

Individuals and Families in Enhanced (2006-08) and Capitol Choice (2009-13) and Standard CDHP (2014—)									
		Individuals				Families			
Plan year	Plan Name	Deductible	Percent Meeting Deductible	Max Out of Pocket	Percent Meeting MOOP	Deductible	Percent Meeting Deductible	Max Out of Pocket	Percent Meeting MOOP
2006	Enhanced	\$250	21.52%	\$1,250	5.80%	\$500	9.95%	\$2,500	0.94%
2007	Enhanced	\$250	21.31%	\$1,250	7.48%	\$500	8.93%	\$2,500	1.00%
2008	Enhanced	\$250	21.95%	\$1,250	8.11%	\$500	9.06%	\$2,500	1.20%
2009	Capitol Choice	\$500	27.85%	\$2,000	1.86%	\$1,500	0.59%	\$6,000	0.01%
2010	Capitol Choice	\$500	25.19%	\$2,000	1.84%	\$1,500	0.49%	\$6,000	0.01%
2011	Capitol Choice	\$575	24.93%	\$2,300	1.61%	\$1,725	0.45%	\$6,900	0.01%
2012	Capitol Choice	\$600	25.70%	\$2,400	1.46%	\$1,800	0.55%	\$7,000	0.01%
2013	Capitol Choice	\$615	25.18%	\$2,470	1.90%	\$1,850	0.52%	\$7,400	0.15%
2014	Standard CDHP	\$1,750	17.76%	\$3,500	6.82%	\$3,500	1.79%	\$7,000	0.31%

Historical Analysis of Individuals and Families Meeting Their Deductibles and Maximum Out of Pocket Expenses

(continued)

The following details the number of individuals and families by plan that met their deductibles and/or maximum out of pocket expense for the years 2006-2014. This report is based on incurred claims.

Individuals and Families in Premier (2006-08) and Optimum PPO (2009-13) and LivingWell PPO (2014—)									
		Individuals				Families			
Plan year	Plan Name	Deductible	Percent Meeting Deductible	Max Out of Pocket	Percent Meeting MOOP	Deductible	Percent Meeting Deductible	Max Out of Pocket	Percent Meeting MOOP
2006	Premier	\$250	30.15%	\$1,000	6.70%	\$500	9.95%	\$2,000	1.17%
2007	Premier	\$250	30.04%	\$1,000	7.78%	\$500	8.93%	\$2,000	1.20%
2008	Premier	\$250	30.51%	\$1,000	8.60%	\$500	9.06%	\$2,000	1.26%
2009	Optimum PPO	\$250	27.18%	\$1,125	10.05%	\$500	8.42%	\$2,250	1.51%
2010	Optimum PPO	\$300	25.80%	\$1,125	10.89%	\$600	7.05%	\$2,250	1.47%
2011	Optimum PPO	\$345	25.16%	\$1,295	9.99%	\$690	7.31%	\$2,590	1.36%
2012	Optimum PPO	\$355	24.87%	\$1,350	9.93%	\$720	5.51%	\$2,700	1.38%
2013	Optimum PPO	\$370	24.86%	\$1,390	11.11%	\$740	7.64%	\$2,780	1.72%
2014	LivingWell PPO	\$500	10.50%	\$2,500	3.06%	\$1,000	3.77%	\$3,000	0.35%

Individuals and Families in Select (2007-08) and Maximum Choice (2009-13) and LivingWell CDHP (2014—)									
		Individuals				Families			
Plan year	Plan Name	Deductible	Percent Meeting Deductible	Max Out of Pocket	Percent Meeting MOOP	Deductible	Percent Meeting Deductible	Max Out of Pocket	Percent Meeting MOOP
2007	Select	\$2,000	11.72%	\$3,000	3.01%	\$3,000	18.50%	\$4,500	2.61%
2008	Select	\$2,000	12.81%	\$3,000	3.63%	\$3,000	20.03%	\$4,500	3.91%
2009	Maximum Choice	\$2,000	14.90%	\$3,000	4.52%	\$3,000	15.96%	\$4,500	3.64%
2010	Maximum Choice	\$2,000	15.12%	\$3,000	4.91%	\$3,000	16.78%	\$4,500	4.14%
2011	Maximum Choice	\$2,300	14.60%	\$3,455	4.53%	\$3,455	18.28%	\$5,185	4.37%
2012	Maximum Choice	\$2,325	14.71%	\$3,550	4.16%	\$3,530	18.82%	\$5,280	3.99%
2013	Maximum Choice	\$2,450	14.55%	\$3,700	4.04%	\$3,650	19.22%	\$5,400	3.57%
2014	LivingWell CDHP	\$1,250	27.00%	\$2,500	7.37%	\$2,500	14.87%	\$5,000	1.54%

Premium (or Premium Equivalent)

The following details the amount of premium* (or premium equivalent) paid by the employee and employer for 2006-2014 and monthly through 2015.

Time Period	Employee Premium Amount	Employer Premium Amount	Total Premium Amount
2006	\$153,787,780	\$948,458,338	\$1,102,246,118
2007	\$167,530,819	\$973,220,791	\$1,140,751,611
2008	\$179,094,322	\$1,039,574,462	\$1,218,668,784
2009	\$210,980,360	\$1,190,104,292	\$1,401,084,653
2010	\$223,160,749	\$1,325,801,265	\$1,548,962,014
2011	\$274,375,886	\$1,324,091,690	\$1,598,467,575
2012	\$271,663,955	\$1,332,767,157	\$1,604,431,112
2013	\$271,156,377	\$1,329,854,915	\$1,601,011,292
2014	\$265,437,387	\$1,348,664,155	\$1,614,101,542
Jan-15	\$21,559,917	\$114,649,814	\$136,209,731

**Premium (or premium equivalent) is based on enrollment using published premium rates—it is NOT based on actual payments received.*

Prescription Drug Utilization *(continued)*

The following details the type of prescription filled, the percent that were generic, and the generic efficiency rate for the most recent rolling year. Based on paid claims..

Time Period: Paid Month	Generic	Brand Name, Generic Available	Brand Name	Other*	Total	Scripts Rx % Generic	Scripts Generic Efficiency Rx
Feb 2014	280,545	13,663	40,472	7,094	341,774	82.08%	95.36%
Mar 2014	290,618	14,063	41,568	7,799	354,048	82.08%	95.38%
Apr 2014	355,910	17,196	51,389	9,747	434,242	81.96%	95.39%
May 2014	275,654	13,336	39,071	7,638	335,699	82.11%	95.39%
Jun 2014	288,180	13,772	41,941	8,137	352,030	81.86%	95.44%
Jul 2014	341,492	15,802	50,640	9,900	417,834	81.73%	95.58%
Aug 2014	275,701	12,990	40,381	7,985	337,057	81.80%	95.50%
Sep 2014	358,209	21,560	51,554	10,038	441,361	81.16%	94.32%
Oct 2014	286,243	26,295	43,684	8,301	364,523	78.53%	91.59%
Nov 2014	300,685	19,559	43,555	8,179	371,978	80.83%	93.89%
Dec 2014	387,687	19,490	61,969	11,210	480,356	80.71%	95.21%
Jan 2015	322,641	13,498	43,951	8,497	388,587	83.03%	95.98%

**Includes: Over the Counter (usually items such as diabetic supplies, syringes, and test strips, etc.), Other/Unavailable or Missing (Unable to tag to a specific group).*

Prescription Drug Utilization *(continued)*

The following details the number of members and patients utilizing prescription benefits and the associated costs for the most recent rolling year. Based on Incurred Claims.

Time Period	Members	Patients	Scripts	Scripts Per Member	Scripts Per Patient	Allow Amt* Per Script	Net Pay Per Script	Member Cost Per Script	Patient Cost Per Script
Nov 2013	265,687	166,942	391,815	1.47	2.87	\$86.22	\$61.32	\$36.54	\$58.15
Dec 2013	265,605	167,458	436,611	1.64	3.10	\$90.55	\$76.59	\$22.77	\$36.11
Jan 2014	265,466	159,761	375,334	1.41	2.85	\$78.97	\$54.28	\$34.79	\$57.80
Feb 2014	265,323	153,927	348,910	1.31	2.74	\$84.22	\$56.68	\$36.08	\$62.20
Mar 2014	265,323	158,738	383,718	1.44	2.89	\$85.11	\$65.84	\$27.73	\$46.35
Apr 2014	264,823	158,054	373,938	1.41	2.86	\$87.06	\$69.59	\$24.54	\$41.11
May 2014	264,390	157,021	377,102	1.43	2.88	\$88.85	\$72.54	\$23.11	\$38.91
Jun 2014	263,978	155,742	367,075	1.39	2.87	\$92.36	\$76.85	\$21.42	\$36.31
Jul 2014	262,820	158,334	373,106	1.42	2.93	\$93.05	\$78.47	\$20.55	\$34.11
Aug 2014	261,551	156,042	369,275	1.41	2.87	\$87.62	\$73.77	\$19.37	\$32.46
Sep 2014	259,600	158,091	385,114	1.48	2.94	\$88.28	\$75.17	\$19.28	\$31.66
Oct 2014	262,653	170,307	407,051	1.55	2.98	\$87.39	\$74.89	\$19.21	\$29.62

***Allow Amt" is the amount of submitted charges eligible for payment for all claims. It is the amount eligible after applying pricing guidelines, but before deducting third party, co-payment, coinsurance, or deductible amounts.*

Prescription Drug Utilization *(continued)*

The following Top 25 Drug Analysis is based on Rx claims incurred January—October 2014.

Prev Rank	Curr Rank	Product Name	Brand/Generic	Therapeutic Class General	Net Pay Rx	Net Pay Rx as Pct of All Drugs	Scripts Rx	Net Pay Per Day Supply Rx	Patients Rx
1	1	HUMIRA	Single source brand	Immunosuppressants	\$9,371,110.93	3.56%	2,505	\$96.77	514
2	2	NEXIUM	Single source brand	Gastrointestinal Drugs	\$8,193,235.58	3.12%	29,273	\$6.89	6,467
3	3	ENBREL	Single source brand	Immunosuppressants	\$7,351,214.30	2.80%	2,070	\$95.83	427
5	4	CRESTOR	Single source brand	Cardiovascular Agents	\$5,940,042.77	2.26%	33,703	\$4.26	6,570
6	5	HUMALOG	Multisource brand, no generic	Hormones & Synthetic Subst	\$5,840,102.93	2.22%	11,108	\$13.18	2,702
4	6	SOVALDI	Specialty	Anti-Infective Agents	\$5,773,464.76	2.20%	202	\$941.53	65
7	7	ABILIFY	Single source brand	Central Nervous System	\$4,098,716.17	1.56%	5,095	\$21.99	1,239
8	8	COPAXONE	Single source brand	Misc Therapeutic Agents	\$3,918,662.27	1.49%	610	\$144.75	119
9	9	LANTUS SOLOSTAR	Single source brand	Hormones & Synthetic Subst	\$3,871,088.96	1.47%	9,271	\$10.18	2,174
11	10	GILENYA	Single source brand	Misc Therapeutic Agents	\$3,005,901.33	1.14%	391	\$172.32	76
10	11	DULOXETINE	Single source generic	Central Nervous System	\$2,966,840.05	1.13%	19,640	\$4.50	3,708
12	12	JANUVIA	Single source brand	Hormones & Synthetic Subst	\$2,930,957.71	1.11%	9,584	\$7.43	2,083
13	13	STELARA	Specialty	Immunosuppressants	\$2,895,372.85	1.10%	237	\$346.34	99
14	14	TECFIDERA	Specialty	Misc Therapeutic Agents	\$2,669,489.96	1.02%	428	\$161.24	79
15	15	ANDROGEL	Multisource brand, no generic	Hormones & Synthetic Subst	\$2,264,055.46	0.86%	4,621	\$14.17	1,183
16	16	CELEBREX	Single source brand	Central Nervous System	\$2,186,504.05	0.83%	8,733	\$6.24	2,168
17	17	GABAPENTIN	Multisource generic	Multiple	\$1,991,931.28	0.76%	1,324	\$66.86	497
18	18	LYRICA	Single source brand	Central Nervous System	\$1,918,873.06	0.73%	6,791	\$8.36	1,368
21	19	GLEEVEC	Single source brand	Antineoplastic Agents	\$1,783,721.67	0.68%	143	\$270.42	29
19	20	DULOXETINE HYDRO-CHLORIDE	Single source generic	Central Nervous System	\$1,771,807.56	0.67%	8,405	\$4.79	2,078
20	21	LEVEMIR FLEXPEN	Single source brand	Hormones & Synthetic Subst	\$1,759,209.35	0.67%	3,713	\$11.28	947
23	22	ONE TOUCH ULTRA	Other/unavailable	Diagnostic Agents	\$1,746,945.77	0.66%	15,958	\$2.73	6,494
22	23	ZETIA	Over the counter (OTC)	Cardiovascular Agents	\$1,741,954.04	0.66%	9,040	\$4.47	1,953
25	24	SYMBICORT	Over the counter (OTC)	Hormones & Synthetic Subst	\$1,700,545.12	0.65%	7,555	\$5.71	2,850
24	25	LANTUS	Single source brand	Hormones & Synthetic Subst	\$1,680,719.94	0.64%	4,010	\$11.14	898

***Product Name" includes all strengths/formulations of a drug*

Prescription Drug Utilization *(continued)*

In summary, the top 25 drugs represent 6.39% of total scripts and 34.44% of total Rx expenditures.

Summary	Net Pay Rx	Scripts Rx	Days Supply Rx
Top Drugs	\$90,563,036	240,373	9,387,562
All Product Names	\$262,950,067	3,760,623	123,108,730
Top Drugs as Pct of All Drugs	34.44%	6.39%	7.63%

Utilization

The top 25 clinical conditions based on incurred claims for January–October 2014.

Prev Rank	Curr Rank	Clinical Condition	Net Pay Med	Net Pay IP Acute	Net Pay OP Med	Admits Per 1000 Acute	Days LOS Admit Acute	Visits Per 1000 Office Med	Visits Per 1000 ER	Patients Med	Net Pay Per Pat Med
1	1	Prevent/Admin Hlth Encounters	\$57,109,003	\$350,928	\$56,680,225	0.03	3.29	824.10	0.73	140,660	\$406.01
2	2	Signs/Symptoms/Oth Cond, NEC	\$54,131,040	\$9,902,045	\$42,547,171	2.18	10.28	460.31	13.05	84,205	\$642.85
3	3	Osteoarthritis	\$41,088,424	\$28,659,804	\$12,336,537	4.22	2.49	196.51	0.58	18,981	\$2,164.71
5	4	Gastroint Disord, NEC	\$29,719,027	\$6,794,469	\$22,902,401	1.60	4.45	128.40	19.45	28,894	\$1,028.55
4	5	Chemotherapy Encounters	\$28,999,092	\$2,738,259	\$26,260,833	0.43	6.33	0.92	0.00	574	\$50,521.07
6	6	Coronary Artery Disease	\$28,738,481	\$16,573,882	\$12,150,050	2.42	3.73	37.22	3.05	6,323	\$4,545.07
7	7	Respiratory Disord, NEC	\$26,474,831	\$8,124,317	\$18,207,134	0.52	4.14	72.07	13.65	21,734	\$1,218.13
8	8	Pregnancy w Vaginal Delivery	\$22,231,699	\$22,130,800	\$100,898	7.34	2.36	0.55	0.56	2,678	\$8,301.61
10	9	Spinal/Back Disord, Low Back	\$21,080,881	\$6,798,457	\$14,254,154	0.70	3.63	485.82	4.90	27,205	\$774.89
9	10	Arthropathies/Joint Disord NEC	\$20,638,687	\$2,121,666	\$18,358,233	0.34	2.88	430.79	5.67	45,265	\$455.95
11	11	Condition Rel to Tx - Med/Surg	\$16,557,717	\$11,011,957	\$5,499,893	1.83	4.76	7.73	1.91	3,186	\$5,197.02
13	12	Newborns, w/wo Complication	\$15,744,210	\$15,184,756	\$554,062	10.52	3.16	4.57	0.16	2,774	\$5,675.63
14	13	Infections, NEC	\$15,508,219	\$13,675,212	\$1,793,509	0.16	3.63	68.48	2.17	15,063	\$1,029.56
12	14	Renal Function Failure	\$15,279,736	\$2,555,084	\$12,658,487	0.50	4.52	15.87	0.70	2,703	\$5,652.88
15	15	Cancer - Breast	\$14,762,562	\$954,283	\$13,752,177	0.26	3.90	28.29	0.06	2,462	\$5,996.17
16	16	Cardiac Arrhythmias	\$12,800,311	\$4,381,799	\$8,386,564	0.91	2.80	35.44	2.62	5,732	\$2,233.13
17	17	Urinary Tract Calculus	\$12,367,407	\$1,231,954	\$11,125,740	0.57	2.44	16.29	6.10	3,326	\$3,718.40
18	18	Spinal/Back Disord, Ex Low	\$12,204,136	\$3,601,677	\$8,584,348	0.34	5.35	442.69	2.68	20,430	\$597.36
19	19	Cardiovasc Disord, NEC	\$11,767,419	\$1,689,205	\$10,069,234	0.55	4.22	44.37	9.52	12,225	\$962.57
20	20	Cholecystitis/Cholelithiasis	\$11,334,481	\$3,085,240	\$8,249,229	0.90	3.56	4.61	1.79	1,826	\$6,207.27
21	21	Diabetes	\$10,741,885	\$2,734,231	\$7,967,028	1.15	5.21	199.45	1.59	22,945	\$468.16
22	22	Cerebrovascular Disease	\$9,977,770	\$6,396,009	\$3,466,768	1.36	4.73	10.33	1.82	2,549	\$3,914.39
23	23	Fracture/Disloc - Upper Extrem	\$9,636,018	\$1,440,461	\$8,179,666	0.21	3.78	59.02	7.32	5,861	\$1,644.09
25	24	Overweight/Obesity	\$9,043,746	\$6,843,016	\$2,185,664	1.50	1.88	18.40	0.02	3,565	\$2,536.82
24	25	Infec/Inflam - Skin/Subcu Tiss	\$9,017,718	\$2,675,426	\$6,291,663	1.14	4.29	239.99	4.76	39,633	\$227.53

NOTE: Medical payments represent only the payments made for the specified condition.

Utilization *(continued)*

In Summary, the top clinical conditions represent more than 58.77% of total paid claims for all clinical conditions.

Summary	Net Pay Med	Net Pay IP Acute	Net Pay OP Med	Admits Per 1000 Acute	Days LOS Admit Acute	Visits Per 1000 Office Med	Visits Per 1000 ER
Top Clinical Conditions	\$516,954,500	\$181,654,940	\$332,561,668	41.7	3.67	3,832.22	104.87
All Clinical Conditions	\$879,648,040	\$285,773,688	\$588,879,231	72.52	4.09	7,412.58	220.30
Top Clinical Conditions as Pct of All Clinical Conditions	58.77%	63.57%	56.47%	57.49%	89.72%	51.70%	47.60%

Claims Lag Analysis

The following claims lag information is based on medical claims (does not include Rx) incurred January–October 2014.

Plan	Number of Medical Claims	Avg Days Lag Per Claim	% Claims Paid Within 30 Days	% Claims Paid Within 60 Days	% Claims Paid Within 90 Days
LivingWell CDHP	2,385,185	21.9	83.05%	92.25%	95.23%
LivingWell PPO	3,689,533	23.9	78.85%	91.19%	95.03%
Standard CDHP	302,573	24.7	79.74%	90.91%	94.29%
Standard PPO	360,137	25.4	76.96%	90.16%	94.51%
~Missing	46,111	32.5	71.33%	86.64%	92.10%
All Plans	6,907,781	23.7	79.68%	91.30%	94.95%

**Missing means the claims could not be tagged to a specific plan.*

Claims Lag Analysis *(continued)*

The following claims lag information is based on all claims (**Medical and Rx**) incurred and paid during the most recent rolling year.

	Month Paid					
Service Month	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Jul-14
Nov 2013	\$2,907,409.74	\$1,919,143.02	\$941,757.47	\$213,970.72	\$521,122.37	\$160,410.24
Dec 2013	\$8,015,968.78	\$4,189,231.06	\$2,253,529.31	\$2,507,804.02	\$615,784.36	\$197,555.13
Jan 2014	\$34,796,820.20	\$11,663,326.40	\$5,188,550.40	\$1,982,019.33	\$1,200,192.86	\$16,078.54
Feb 2014	\$41,258,637.52	\$39,168,769.01	\$9,891,230.94	\$2,774,962.38	\$2,110,121.29	\$445,269.03
Mar 2014	\$0.00	\$47,664,149.26	\$44,651,836.72	\$10,522,330.82	\$3,802,229.49	\$1,167,345.97
Apr 2014	\$0.00	\$0.00	\$55,341,562.04	\$38,604,981.84	\$12,101,732.96	\$3,238,362.39
May 2014	\$0.00	\$0.00	\$0.00	\$51,683,081.30	\$39,744,913.64	\$11,875,540.07
Jun 2014	\$0.00	\$0.00	\$0.00	\$0.00	\$52,480,629.80	\$46,567,315.28
Jul 2014	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$62,401,400.22
Aug 2014	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Sep 2014	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Oct 2014	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

	Month Paid					
Service Month	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15
Nov 2013	\$175,026.98	\$120,030.38	(\$22,163.01)	\$1,023.84	(\$213,520.50)	(\$4,208,040.13)
Dec 2013	\$324,570.41	\$197,385.79	\$41,744.14	\$473,928.61	(\$36,357.14)	\$3,474.67
Jan 2014	(\$54,630.75)	\$360,237.30	\$17,370.34	\$4,305.71	(\$182,474.01)	(\$14,734.10)
Feb 2014	\$787,076.37	\$240,275.34	(\$105,004.91)	\$302,959.39	(\$148,545.74)	(\$1,905,778.40)
Mar 2014	\$861,821.18	\$349,759.11	\$589,706.53	\$115,080.49	\$102,706.36	\$316,658.88
Apr 2014	\$1,733,618.35	\$1,163,138.37	\$426,272.36	\$198,132.92	(\$113,972.33)	\$259,705.02
May 2014	\$4,604,357.20	\$2,724,918.67	\$1,163,558.69	\$194,276.34	\$55,641.95	\$51,074.84
Jun 2014	\$11,811,747.01	\$5,333,692.41	\$2,897,616.62	\$554,834.50	\$447,796.18	\$216,507.24
Jul 2014	\$43,846,858.33	\$13,531,629.96	\$5,088,775.76	\$1,881,529.47	\$165,796.92	\$186,675.29
Aug 2014	\$55,697,718.87	\$45,066,045.63	\$11,320,633.53	\$3,715,142.80	\$1,474,277.88	\$86,623.77
Sep 2014	\$0.00	\$61,152,026.72	\$46,683,925.17	\$8,351,739.82	\$2,637,273.73	\$945,240.75
Oct 2014	\$0.00	\$0.09	\$68,103,824.12	\$48,196,996.89	\$11,505,659.91	\$3,128,301.26

Claims Distribution Based on Age/Gender

The following is based on claims incurred January–October 2014.

	Female			Male		
Age Group	Members Avg	Net Pay Med and Rx	Net Pay Per Member	Members Avg	Net Pay Med and Rx	Net Pay Per Member
Ages 1-4	5,354	\$6,450,374.52	\$1,204.82	5,705	\$10,947,599.36	\$1,919.05
Ages 5-9	7,749	\$7,540,344.39	\$973.14	7,948	\$8,625,791.40	\$1,085.33
Ages 10-14	8,547	\$12,116,597.89	\$1,417.71	8,969	\$13,196,073.78	\$1,471.36
Ages 15-17	5,573	\$9,922,685.20	\$1,780.56	5,846	\$10,672,566.63	\$1,825.59
Ages 18-19	3,748	\$9,864,621.40	\$2,631.83	3,882	\$5,894,795.63	\$1,518.34
Ages 20-24	9,246	\$22,758,004.17	\$2,461.47	8,675	\$13,712,586.16	\$1,580.74
Ages 25-29	8,402	\$27,608,699.61	\$3,286.08	4,673	\$7,925,644.49	\$1,696.23
Ages 30-34	10,014	\$35,942,105.29	\$3,589.19	5,440	\$12,050,611.44	\$2,215.39
Ages 35-39	10,786	\$39,536,147.43	\$3,665.47	6,042	\$15,978,522.11	\$2,644.79
Ages 40-44	12,979	\$52,651,841.39	\$4,056.63	7,247	\$24,667,545.51	\$3,403.64
Ages 45-49	13,761	\$66,223,980.91	\$4,812.51	8,115	\$33,645,801.21	\$4,146.23
Ages 50-54	16,030	\$90,024,741.78	\$5,615.88	9,475	\$52,830,856.29	\$5,576.05
Ages 55-59	18,793	\$126,577,112.51	\$6,735.30	11,109	\$75,518,481.63	\$6,798.20
Ages 60-64	20,203	\$152,597,861.72	\$7,553.41	12,635	\$112,338,898.64	\$8,891.37
Ages 65-74	2,490	\$22,753,950.98	\$9,136.67	1,757	\$22,076,734.50	\$12,564.30
Ages 75-84	132	\$2,707,903.36	\$20,529.97	148	\$2,762,907.85	\$18,643.10
Ages 85+	11	\$838,232.68	\$75,516.46	7	\$760,322.41	\$113,480.96
~Missing	0	\$0.00	\$0.00	0	\$0.00	\$0.00

Allowed Amount Distribution

The following table shows the distribution of members for whom the amounts of charges within the specified ranges were allowed. The data appears for the years of 2006—2014 and year to date for 2015.

Allowed Amount	2006	2007	2008	2009	2010	2011	2012	2013	2014
less than 0.00	9	16	27	22	42	63	105	5,801	11
\$0.00 - \$499.99	54,058	53,891	53,571	53,160	57,392	58,044	60,345	61,969	74,925
\$500.00 - \$999.99	32,931	33,830	34,248	34,982	34,386	36,012	36,455	37,461	40,556
\$1,000.00 - \$1,999.99	40,360	42,464	42,360	43,452	42,988	44,147	44,300	44,158	42,363
\$2,000.00 - \$4,999.99	54,430	56,819	58,612	59,566	60,341	60,339	60,139	58,173	48,571
\$5,000.00 - \$9,999.99	30,373	32,271	34,487	35,696	36,028	36,375	36,020	34,695	25,516
\$10,000.00 - \$14,999.99	10,608	11,983	13,272	14,198	14,874	15,009	15,270	14,920	10,621
\$15,000.00 - \$19,999.99	4,726	5,470	6,332	6,849	7,184	7,339	7,653	7,660	5,412
\$20,000.00 - \$29,999.99	4,284	5,050	5,930	6,475	6,960	7,131	7,113	7,357	5,190
\$30,000.00 - \$49,999.99	2,844	3,268	3,820	4,451	4,935	5,155	5,309	5,436	4,156
\$50,000.00 - \$74,999.99	1,090	1,306	1,492	1,773	2,022	2,256	2,391	2,531	1,913
\$75,000.00 - \$99,999.99	465	536	589	688	829	839	914	1,020	772
\$100,000.00 - \$149,999.99	354	406	499	545	651	707	789	806	671
\$150,000.00 - \$199,999.99	117	160	194	203	225	274	296	359	280
\$200,000.00 - \$249,999.99	60	81	83	116	117	118	136	144	151
over \$249,999.99	99	127	152	166	196	259	268	294	231
Total	236,808	247,678	255,668	262,342	269,170	274,067	277,503	282,784	261,339

Summary of Enrollment and Claims

The following provides a summary of members, incurred medical claims, and incurred Rx claims for the most recent rolling year.

Time Period	Members	Net Pay Med and Rx	Net Pay Med	Net Pay Rx	Claims Paid	Claims Paid Med	Scripts Rx
Nov 2013	265,687	\$127,035,550.34	\$103,009,922.33	\$24,025,628.01	725,520	317,042	391,815
Dec 2013	265,605	\$149,813,261.46	\$116,374,957.62	\$33,438,303.84	783,659	329,563	436,611
Jan 2014	265,466	\$97,105,377.01	\$76,732,428.78	\$20,372,948.23	690,948	294,172	375,334
Feb 2014	265,323	\$94,819,972.22	\$75,043,167.22	\$19,776,805.00	634,429	269,353	348,910
Mar 2014	265,323	\$110,143,624.81	\$84,879,607.92	\$25,264,016.89	686,505	286,104	383,718
Apr 2014	264,823	\$112,953,533.92	\$86,931,521.52	\$26,022,012.40	683,958	293,600	373,938
May 2014	264,390	\$112,097,362.70	\$84,743,676.52	\$27,353,686.18	670,029	275,712	377,102
Jul 2014	262,820	\$127,102,665.95	\$97,826,592.61	\$29,276,073.34	699,662	308,975	373,106
Jun 2014	263,978	\$120,310,139.04	\$92,101,544.04	\$28,208,595.00	670,754	286,442	367,075
Aug 2014	261,551	\$117,360,442.48	\$90,119,346.56	\$27,241,095.92	659,996	274,790	369,275
Sep 2014	259,600	\$119,770,206.19	\$90,820,203.48	\$28,950,002.71	684,577	283,514	385,114
Oct 2014	262,653	\$130,934,782.27	\$100,449,950.86	\$30,484,831.41	747,493	323,269	407,051

NOTE: Includes run out data from all Carriers

The following illustrates the change in incurred claims (includes medical and Rx) by rolling year.

Time Period	Members	Total Medical and Rx Claims	Total Medical Claims	Total Rx Claims
Nov 2012 - Oct 2013	267,687	\$1,539,378,472	\$1,187,495,184	\$351,883,288
Nov 2013 - Oct 2014	264,404	\$1,424,943,580	\$1,104,529,581	\$320,413,999
% Change (Roll Yrs)	-1.20%	-7.40%	-7.00%	-8.90%